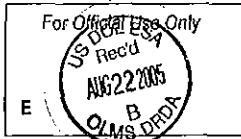


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>15093</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>MICHAEL</u> <u>A</u> <u>TRANGHESE</u> P.O. Box, Bldg., Room No., if any Street <u>7 LABORERS' WAY</u> City <u>HOPKINTON</u> State <u>Massachusetts</u> ZIP Code + 4 <u>01748</u>	4. Name, file number, and address of labor organization. Name <u>MASSACHUSETTS LABORERS' DISTRICT COUNCIL</u> Labor Organization File Number <u>014274</u> P.O. Box, Building and Room Number, if any Street <u>7 LABORERS' WAY</u> City <u>HOPKINTON</u> State <u>Massachusetts</u> ZIP Code + 4 <u>01748</u>
5. Position in labor organization. <u>Secretary-Treasurer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. N/A 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Michael A. Tranghese</u>	On <u>8/15/2005</u>	<u>(508) 435-4164</u>
	Date	Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Lazard Asset Management

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street One Rockefeller Plaza

City New York

State New York

ZIP Code + 4 10020

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Massachusetts Laborers' Annuity Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts

ZIP Code + 4 01803

11.a. Nature of such dealing.

Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

1/21/04

Business Dinner @ restaurant

12.b. Amount.

\$60

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

N/A

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name MA Laborers Joint Labor Management Unified

Trade Name, if any: MA Laborers' Unified Trust

P.O. Box, Bldg., Room No., if any

Street 7 Laborers' Way

City Hopkinton

State Massachusetts ZIP Code + 4 01748

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Market Recovery Fund

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

1/20/04 Trustee Breakfast Meeting (\$46.48)

12.b. Amount.

\$47

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Meketa Investment Group Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 35 Braintree Hill Park City Braintree State Massachusetts ZIP Code + 4 02184	9. Business deals with: <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name MASSACHUSETTS LABORERS ANNUITY FUND Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 14 New England Executive Park City Burlington State Massachusetts ZIP Code + 4 01803	11.a. Nature of such dealing. Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants. 11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received. 9/24/04 Round of golf 12.b. Amount. \$98

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name MA Laborers Annuity Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts

ZIP Code + 4 01803

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Multi-day Trustee Meeting
Hotel Room Cahrge (\$602.56)

12.b. Amount.

\$603

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Intercontinental Real Estate Corp.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any:

Street 1270 Soldiers Field Road

City Boston

State Massachusetts ZIP Code + 4 02135

9. Business deals with:

☐ a. Labor Organization

☒ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name MA Laborers' Annuity Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any:

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

6/28/04

Azumah Charity Golf Outing

9/27/04

Educational Conference & Golf Outing

12.b. Amount.

\$100

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name The Segal Company

Trade Name, if any: Segal

P.O. Box, Bldg., Room No., if any

Street 116 Huntington Avenue

City Boston

State Massachusetts ZIP Code + 4 02116

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name MA Laborers' Annuity Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

11/16/04 Multi-fund Holiday Dinner sponsored by The Segal Co. 23 people attended. Value \$100.00

6/17/04 Round of Golf \$85.00

10/8/04 Round of Golf \$54.50

12.b. Amount.

\$240

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name New England Laborers Training Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 37 East St.

City Hopkinton

State Massachusetts ZIP Code + 4 01748

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Training / Education Trust Fund for affiliates of the New England States

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Training Fund Luncheon 7/23/04 \$62.08

12.b. Amount.

\$62

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Stat Street Global Advisors

Trade Name, if any: SSGA

P.O. Box, Bldg., Room No., if any

Street One Lincoln Center

City Boston

State Massachusetts ZIP Code + 4 02111-2900

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name MA Laborers' Annuity Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 14 New England Executive Park

City Burlington

State Massachusetts ZIP Code + 4 01803

11.a. Nature of such dealing.

Provides Annuity Benefits to Massachusetts, Maine, New Hampshire and Vermont union member participants.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

9/1/04

Tickets to Deutsche Bank Golf Classic

4 @ \$45.00 \$180.00

12.b. Amount.

\$180

Name of Person Filing MICHAEL TRANGHESE

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Construction Industries of Massachusetts

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1671 Worcestor Road

City Framingham

State Massachusetts

ZIP Code + 4 01701

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Represents contractors signatory with the MLDC

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

6/24/04

Invitation for Scholarship Golf Outing

12.b. Amount.

\$50

**ADDENDA TO THE LM-30 FORM WHICH IS TO BE
INCORPORATED AND MADE PART OF THE LM-30 FORM**



ADDENDUM A (UNSOLICITED GIFTS OR PROMOTIONAL ITEMS)

On several occasions in 2004, I recall that I was given (a) complimentary promotional item(s), such as a (clothing item, accessory or printed material with LIUNA logo, etc...). At no time did I solicit such item(s), and they were sent to my office without my prior knowledge or authorization. I did not retain possession of any of these items nor did any member of my family. I have no knowledge as to the value of the item(s), and do not recall the manufacturer or provider of such (an) item(s).

ADDENDUM B (UNSOLICITED HOLIDAY GIFTS)

On several occasions in 2004, particularly during holiday seasons, I recall that I was given complimentary items, a (wine and cheese basket, fruit basket, holiday ham, holiday turkey, gourmet foods, etc...). At no time did I solicit such item(s), it/they were sent to my office without my prior knowledge or authorization. I did not retain possession of any of these items, as I shared them with the individuals in my office. My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because it is perishable, the item may, at the discretion of the employee's supervisor or an agency ethics official, be given to an appropriate charity, shared within the recipient's office, or destroyed." C.F.R. 2635.205.

ADDENDUM C (UNSOLICITED GIFTS-HOTEL)

On several occasions in 2004, I recall complimentary gifts were sent without my request to my hotel room, such as a fruit basket, cheese basket, bottle of wine or spirits, etc... I have no recollection or knowledge as to the value of the item, nor as to the purchaser or provider of such item.

ADDENDUM D (UNSOLICITED GIFTS-GOLF)

I recall that I received unsolicited items at golf outings/tournaments, such as a sleeve of balls, a golf club or golf apparel, etc..., in connection with a round of golf, which I have reported. At no time did I solicit such and item, and I have no specific recollection of receipt of any such item, nor knowledge as to the value of the item.

ADDENDUM E (MEALS/EVENTS WITH FRIENDS)

I have personal friendships with individuals who may be employed by reportable entities under the Labor-Management Reporting and Disclosure Act, which exist separate and apart from my role as a union officer/employee. In 2004, it is conceivable that I received the benefit of a meal, refreshment or social event from these individuals, which I did not report because I do not have any records of these personal encounters and have no specific recollection of any benefits received.

ADDENDUM F (MEAL/EVENTS WITHOUT SPECIFIC RECORDS OR RECOLLECTION)

It is conceivable that I received the benefit of a meal, refreshment or social event from an individual who may be employed by a reportable entity under the Labor-Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received.

ADDENDUM G (PAC)

I am not reporting any benefits that I may have received from a political action committee ("PAC"). My understanding is that PACs report all receipts and disbursements under the Federal Election Campaign Act, and I do not need to report under the Labor-Management Reporting and Disclosure Act.

ADDENDUM H (UNION TO UNION BENEFITS)

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers' International Union of North America ("LIUNA"), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of Labor is that benefits received from LIUNA-affiliated labor organizations and other labor organizations are not reportable on the LM-30 report, and I am following that guidance.

MASSACHUSETTS LABORERS' DISTRICT COUNCIL

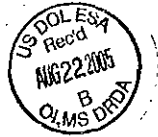
of the Laborers' International Union of North America, AFL-CIO

7 Laborers' Way
Hopkinton, Massachusetts 01748
Fax (508) 435-7982

Hopkinton Telephones:
(508) 435-4164
(508) 435-4253



Boston Telephones:
(617) 969-4018
(617) 969-4019



August 12, 2005

U.S. Department of Labor
Employee Standards Administration
Office of Labor-Management Standards
200 Constitution Avenue, NW
Room N-5616
Washington, D.C. 20210

Dear Sir or Madam:

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have reviewed all of my available 2004 records as well as my recollection. I have provided my best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

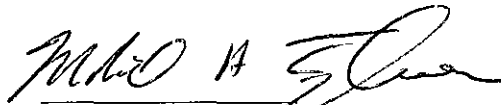
As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department since that time has continued to issue and revise its compliance advice, including guidance regarding related benefit funds. My understanding is that the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record or any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

U.S. Department of Labor
Page 2

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael A. Tranchese", written over a horizontal line.

Michael A. Tranchese
Secretary-Treasurer
Mass Laborers' District Council